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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEVADA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Tristan First name Jeronel Middle name Fernandez Manikad Last name and Suffix (Sr., Jr., II, III)	Denice First name Dan Menor Middle name Nillo Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2788	xxx-xx-8006

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Tristan Jeronel Fernandez Manikad Debtor 1 Debtor 2 **Denice Dan Menor Nillo** Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 7813 Cape Flattery Las Vegas, NV 89147 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Clark County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district.

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

I have another reason.

Explain. (See 28 U.S.C. § 1408.)

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	otor 1 Tristan Jeronel Fe Denice Dan Meno		lanikad			Case number (if known)
Par	t 2: Tell the Court About	Your Bankrı	uptcy Ca	ase		
7.	The chapter of the Bankruptcy Code you are			orief description of each, see go to the top of page 1 and		d by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy priate box.
	choosing to file under	■ Chapte	er 7			
		☐ Chapte	r 11			
		☐ Chapte	r 12			
		☐ Chapte	er 13			
8.	How you will pay the fee	abou orde a pre	ut how your. If your e-printed ed to pay	ou may pay. Typically, if you a attorney is submitting your p address. y the fee in installments. If	are paying the fe ayment on your l	check with the clerk's office in your local court for more details be yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with option, sign and attach the <i>Application for Individuals to Pay</i>
		☐ I req but is appli	luest that s not requies to you	uired to, waive your fee, and ur family size and you are un	ay request this of may do so only i able to pay the fe	option only if you are filing for Chapter 7. By law, a judge may, if your income is less than 150% of the official poverty line that fee in installments). If you choose this option, you must fill out (Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
			District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your	■ No.	Go to I	ine 12.		
	residence?	☐ Yes.	Has yo	our landlord obtained an evict	tion judgment ag	gainst you?
				No. Go to line 12.		
				Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition.	nt About an Evict	tion Judgment Against You (Form 101A) and file it as part of

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	otor 1 Tristan Jeronel Fe btor 2 Denice Dan Menor		Manikad	Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code
	it to this petition.		Check the appropriate bo	ox to describe your business:
	·		☐ Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	е
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to	□ res.	What is the hazard?	
	public health or safety?			
	Or do you own any property that needs		If immediate attention is	
	immediate attention?		needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	-			Number, Street, City, State & Zip Code

Case 19-16995-mkn Doc 1 Entered 10/30/19 14:01:42 Page 5 of 59 Debtor 1 Tristan Jeronel Fernandez Manikad Debtor 2 **Denice Dan Menor Nillo** Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you receive a briefing about Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do so, you are not eligible to a certificate of completion. of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so.

Voluntary Petition for Individuals Filing for Bankruptcy

Active duty.

combat zone.

of credit counseling with the court.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

Active duty.

military combat zone.

I am currently on active military duty in a

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

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Deb Deb	tor 1 Tristan Jeronel Fe tor 2 Denice Dan Meno		Manikad		Case nu	umber (if known)		
Part	6: Answer These Questi	ions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consun individual primarily for a personal,			e defined in 11 U.S.C.	. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busines money for a business or investmer					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consur	ner debts or bus	siness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available				and administrative expenses	
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-		
		☐ 100-19 ☐ 200-99		10,001-25,0	00	☐ More tr	nan100,000	
19.	How much do you	\$0 - \$!	50,000	□ \$1,000,001 -			00,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001			,000,001 - \$10 billion 0,000,001 - \$50 billion	
			001 - \$500,000 001 - \$1 million	□ \$100,000,00			nan \$50 billion	
20.	How much do you	□ \$0 - \$9	50,000	□ \$1,000,001 -			00,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million			□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 ☐ \$100,000,00			han \$50 billion	
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare u	inder penalty of p	erjury that the i	information provided i	is true and correct.	
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out the document, I have obtained and read the notice required by 11 U.S.C. § 342(b).			help me fill out this					
		I request	relief in accordance with the chapte	er of title 11, Unite	ed States Code,	, specified in this petit	tion.	
			and making a false statement, conce cy case can result in fines up to \$25					
			an Jeronel Fernandez Manika Jeronel Fernandez Manikad	d	/s/ Denice Dan	Dan Menor Nillo		
			e of Debtor 1		Signature of D			
		Executed	I on October 29, 2019		Executed on	October 29, 2019)	
		LACCULEU	MM / DD / YYYY		EXCOULOG OII	MM / DD / YYYY	<u>*</u>	

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Debtor 1 Debtor 2 Tristan Jeronel For Denice Dan Meno		anikad	Case	e number (if known)
For your attorney, if you are represented by one	under Chap	ter 7, 11, 12, or 13 of title 11, l	Jnited States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	•	se in which § 707(b)(4)(D) appled with the petition is incorrect		ledge after an inquiry that the information in the
	/s/ Rodney	/ K. Okano	Date	October 29, 2019
	Signature of	Attorney for Debtor		MM / DD / YYYY
	Rodney K	. Okano		
	Printed name			
	LAW OFF	CE OF RODNEY K. OKA	NO	
	Firm name			
	6069 S. Fo	rt Apache Road		
	Suite 100			
		s, NV 89148		
	Number, Street,	City, State & ZIP Code		
	Contact phone	(702) 566-3600	Email address	okanofirm@attorneyokano.com
	7852 NV			
	Bar number & S	tate		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill	ill in this information to identify your case:			
Del	pebtor 1 Tristan Jeronel Fernandez Manikad			
	First Name Middle Name Last Name			
	Pebtor 2 Denice Dan Menor Nillo First Name Middle Name Last Name			
` '	1,, 3,			
Uni	Inited States Bankruptcy Court for the: DISTRICT OF NEVADA			
	ase numberknown)		_	if this is an
			amend	led filing
	Official Form 106Sum ummary of Your Assets and Liabilities and Certain Statistical	Information	1	2/15
info you	e as complete and accurate as possible. If two married people are filing together, both are ex- formation. Fill out all of your schedules first; then complete the information on this form. If your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this pagart 1: Summarize Your Assets	you are filing amend		
га	att 1. Summanze Tour Assets			
			Your as Value of	sets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	8,187.60
	1c. Copy line 63, Total of all property on Schedule A/B		\$	8,187.60
Par	art 2: Summarize Your Liabilities			
			Your lia	bilities you owe
			Amount	you owe
2.	 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Pa 	art 1 of Schedule D	\$	0.00
3.	 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F. 		\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E	:/F	\$	77,497.26
		Your total liabilities	\$	77,497.26
Par	art 3: Summarize Your Income and Expenses			
4.	. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	2,594.04
5.	. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	2,558.00
Par	art 4: Answer These Questions for Administrative and Statistical Records			
6.	 Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form. 	m to the court with yo	ur other sch	edules.
7.	■ Yes . What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an in household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S		a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the court with your other schedules.	· ·	box and su	bmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 2	Denice Dan Menor Nillo	Case number (if known)	
	m the Statement of Your Current Monthly Income: Cop A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L		\$ 3,724.03

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Tristan Jeronel Fernandez Manikad

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	Case 13-10335-IIIk	11 DOC 1 Entered 10/30/19 14:01	1.42 Fage 14 (JI 33
Fill in this infor	mation to identify your case a	nd this filing:		
Debtor 1	Tristan Jeronel Fernan			
Debtor 2	First Name Denice Dan Menor Nille	Middle Name Last Name		
(Spouse, if filing)	First Name	Middle Name Last Name		
United States Ba	ankruptcy Court for the: DISTF	RICT OF NEVADA		
Case number				☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
Schedul	e A/B: Property	V		12/15
think it fits best. B information. If mor Answer every ques	de as complete and accurate as por re space is needed, attach a separ stion.	List an asset only once. If an asset fits in more than one ossible. If two married people are filing together, both are ate sheet to this form. On the top of any additional pages	equally responsible for s	supplying correct
Part 1: Describe	Each Residence, Building, Land,	or Other Real Estate You Own or Have an Interest In		
1. Do you own or l	have any legal or equitable intere	st in any residence, building, land, or similar property?		
No. Go to Par	rt 2.			
☐ Yes. Where i	is the property?			
Part 2: Describe	Your Vehicles			
□ No ■ Yes				
3.1 Make:	Mazda	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
WI0001.	3	Debtor 1 only		aims Secured by Property.
Year: Approximat	2014 te mileage: 50000	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other infor		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:
Vehicle	Danasaisa		\$7,185.00	\$7,185.00
(Finance with Cor	Possession ed in mother's name nsumer Portfolio with mate balance left of 99)	☐ Check if this is community property (see instructions)	<u> </u>	φι,ιοσ.σσ
		d other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle according to the contract of the contr		
■ No □ Yes				
		n for all of your entries from Part 2, including any that number here		\$7,185.00
Part 3: Describe	Your Personal and Household It	ems		
		terest in any of the following items?		Current value of the

portion you own?

Official Form 106A/B Schedule A/B: Property page 1

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	ebtor 1 ebtor 2	Tristan Jeroi Denice Dan I	nel Fernandez Manikad Menor Nillo	Case number (if know	/n)
					Do not deduct secured claims or exemptions.
6.	Example No	old goods and fi es: Major applian Describe	urnishings ces, furniture, linens, china, kitchenware		Same of oxemptions.
			Furniture and Electronics		\$600.00
			Debtor's Possession		
7.	■ No	es: Televisions ar including cell	nd radios; audio, video, stereo, and digital equipme phones, cameras, media players, games	ent; computers, printers, scanners; musi	c collections; electronic devices
	☐ Yes.	Describe			
8.	Example —		figurines; paintings, prints, or other artwork; books ons, memorabilia, collectibles	, pictures, or other art objects; stamp, co	oin, or baseball card collections;
	■ No □ Yes.	Describe			
9.		ent for sports ar es: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicy	/cles, pool tables, golf clubs, skis; cano	es and kayaks; carpentry tools;
	■ No □ Yes.	Describe			
10	. Firearn Examp		s, shotguns, ammunition, and related equipment		
	■ No □ Yes.	Describe			
11	_		othes, furs, leather coats, designer wear, shoes, ac	cessories	
	□ No ■ Yes.	Describe			
			Clothing Debtor's Possession		\$400.00
12	■ No		welry, costume jewelry, engagement rings, wedding	g rings, heirloom jewelry, watches, gem	s, gold, silver
13	Examp	rm animals oles: Dogs, cats, b	birds, horses		
	■ No □ Yes.	Describe			
14	■ No		d household items you did not already list, incl	uding any health aids you did not list	
	☐ Yes.	Give specific info	ormation		
1			of all of your entries from Part 3, including any on the comment of the comment o		\$1,000.00

Schedule A/B: Property

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the

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	ebtor 1 ebtor 2	Tristan Jero Denice Dan		nandez Manikad		Case nur	mber (if known)	
D(DOIOI Z	Deffice Daff	WEITOI	AIIIO			inder (ii known)	
								portion you own? Do not deduct secured claims or exemptions.
16	Cash							
10.		les: Money you	have in y	our wallet, in your home,	, in a safe deposit box	, and on hand when you	file your petition	
	■ No							
	☐ Yes							
4 7	Damasii							
17.	Examp			r other financial accounts ve multiple accounts with			ns, brokerage hous	ses, and other similar
	□ No				Institution name:			
	■ Yes				mstitution name.			
			17.1.	Prepaid account #5659	ADP			\$2.60
18.	Examp ■ No	les: Bond funds,		cly traded stocks ent accounts with brokera		ket accounts		
	⊔ Yes			institution of issuer flam	ie.			
19.	Non-pu joint ve		ock and	interests in incorporate	ed and unincorporat	ed businesses, includ	ing an interest in	an LLC, partnership, and
	■ No							
	☐ Yes.	Give specific inf		about themme of entity:		% of ow	nership:	
20.	Negotia Non-ne ■ No	able instruments	include nents are	nds and other negotiable personal checks, cashier those you cannot transfe about them uer name:	s' checks, promissory	notes, and money orde	rs.	
21.		nent or pension les: Interests in		t s SA, Keogh, 401(k), 403(k	b), thrift savings accou	unts, or other pension or	profit-sharing plar	ns
	■ No							
	☐ Yes. I	_ist each accour		ely. of account:	Institution name:			
22.	Your sh		d deposi	nents ts you have made so tha dlords, prepaid rent, publ				or others
					Institution name or	· individual:		
23.		es (A contract fo	or a perio	dic payment of money to	you, either for life or	for a number of years)		
	■ No	lo	auar nam	o and description				
	☐ Yes			e and description.				
24.	26 U.S.C	s in an education C. §§ 530(b)(1),		n an account in a qualit and 529(b)(1).	fied ABLE program,	or under a qualified st	ate tuition progra	m.
	■ No □ Yes	ln	stitution :	name and description. Se	eparately file the recor	rds of any interests.11 U	.S.C. § 521(c):	
25.	Trusts,	equitable or fu	ture inte	rests in property (other	r than anything lister	d in line 1), and rights	or powers exercis	sable for your benefit
	■ No				-	-		
	☐ Yes.	Give specific inf	ormation	about them				

Official Form 106A/B Schedule A/B: Property page 3

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	ebtor 1 ebtor 2	Tristan Jeronel Fernander Denice Dan Menor Nillo	z Manikad	Case number (if kno	own)
26	Exam	s, copyrights, trademarks, trad oles: Internet domain names, web			
	■ No □ Yes.	Give specific information about t	hem		
27	. Licens Examp ■ No	es, franchises, and other gene	ral intangibles icenses, cooperative association	on holdings, liquor licenses, professional lic	censes
M	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax re f	funds owed to you			dumo di exemptione.
		Give specific information about the	nem, including whether you alr	eady filed the returns and the tax years	
			Potential 2019 Federal Debtor's entitlemen		
			this time		Unknown
30	. Other a Examp	Give specific information amounts someone owes you bles: Unpaid wages, disability insi benefits; unpaid loans you n Give specific information		nefits, sick pay, vacation pay, workers' cor	mpensation, Social Security
31		ets in insurance policies bles: Health, disability, or life insu	rance; health savings account	(HSA); credit, homeowner's, or renter's ins	surance
		Name the insurance company of Company		Beneficiary:	Surrender or refund value:
32	If you some of	terest in property that is due your are the beneficiary of a living trustone has died. Give specific information		ed nsurance policy, or are currently entitled to	receive property because
33	Exam _i ■ No	oles: Accidents, employment disp		uit or made a demand for payment is to sue	
		Describe each claim			
34	■ No	contingent and unliquidated class Describe each claim	aims of every nature, includi	ng counterclaims of the debtor and righ	ts to set off claims
35	. Any fir	nancial assets you did not alrea	ndy list		
	■ No □ Yes.	Give specific information			

Official Form 106A/B Schedule A/B: Property page 4

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	tor 1 Tristan Jeronel Fernandez Manikad Denice Dan Menor Nillo		Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$2.60
Part	5: Describe Any Business-Related Property You Own or Have an Interest	est In. List any real est	ate in Part 1.	
37. [Oo you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	st In.	
46.	Do you own or have any legal or equitable interest in any farm-	or commercial fishi	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
ı	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information	?		
54.	Add the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$7,185.00	•	
57.	Part 3: Total personal and household items, line 15	\$1,000.00		
58.	Part 4: Total financial assets, line 36	\$2.60		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$8,187.60	Copy personal property total	\$8,187.60
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$8 187 60

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1	Tristan Jeronel F	ernandez Manikad		
	First Name	Middle Name	Last Name	
Debtor 2	Denice Dan Meno	or Nillo		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number (if known)				Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

4/19

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

Schedule A/B that lists this property	portion you own		• •	·
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2014 Mazda 3 50000 miles Vehicle	\$7,185.00		\$0.00	Nev. Rev. Stat. § 21.090(1)(f)
Debtor's Possession (Financed in mother's name with Consumer Portfolio with approximate balance left of \$18,704.99) Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Furniture and Electronics Debtor's Possession	\$600.00		\$600.00	Nev. Rev. Stat. § 21.090(1)(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Clothing Debtor's Possession	\$400.00		\$400.00	Nev. Rev. Stat. § 21.090(1)(b)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Prepaid account #5659: ADP	\$2.60		\$2.60	Nev. Rev. Stat. § 21.090(1)(z)
LINE HOLLI SCHEUULE A/B. 11.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Debtor 2	Tristan Jeronel Fernandez Mani Denice Dan Menor Nillo	kad	Case number (if known)			
	description of the property and line on dule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
Pote Refu	ential 2019 Federal Income Tax	Unknown		\$6,000.00	Nev. Rev. Stat. § 21.090(1)(z)	
Deb this	tor's entitlement is unknown at time from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
(Subj	you claiming a homestead exemption ect to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover □ No	3 years after that for ca	ises fi	,	•	

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Fill in this inform					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEVADA			
Case number _					☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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	Case 19-1	.0995-111811	DUCI	Littered 10/30	113 14.01.42	rage 22 or	39
Fill in th	nis information to identify	your case:					
Debtor 1	Tristan Jero	nel Fernandez I	Manikad				
	First Name	Middle	Name	Last Name		-	
Debtor 2	Domoc Ban		Mana	L and Niama		-	
(Spouse if,	filing) First Name	Middle	Name	Last Name			
United S	States Bankruptcy Court for	the: DISTRICT	OF NEVAD	A		-	
Case nu	ımber						
(if known)							heck if this is an
						a	mended filing
Officia	al Form 106E/F						
	dule E/F: Credito	re Who Hav	a lineac	urad Claime			12/15
	nplete and accurate as poss				Part 2 for craditors with	NONDRIORITY clai	
Schedule Schedule left. Attac name and	atory contracts or unexpired G: Executory Contracts and D: Creditors Who Have Clain h the Continuation Page to t case number (if known).	Unexpired Leases (ms Secured by Prop his page. If you have	Official Form erty. If more s e no informati	106G). Do not include pace is needed, copy	any creditors with partia the Part you need, fill it o	ally secured claims out, number the en	that are listed in tries in the boxes on the
Part 1:							
_	ny creditors have priority un	secured claims aga	inst you?				
	lo. Go to Part 2.						
	es.						
Part 2:	List All of Your NONPR	RIORITY Unsecure	ed Claims				
	ny creditors have nonpriorit						
_	lo. You have nothing to report			ourt with your other sch	odulos		
_		iri triis part. Subiriit trii	is ioiiii to the c	ourt with your other sche	edules.		
Y	es.						
unse	all of your nonpriority unsec cured claim, list the creditor se one creditor holds a particular 2.	parately for each clai	m. For each cla	aim listed, identify what t	type of claim it is. Do not li	st claims already inc	luded in Part 1. If more
							Total claim
4.1	Aargon Agency Inc		Last 4 digir	ts of account number	0527		\$9,904.00
	Nonpriority Creditor's Name		_				
	Attn: Bankruptcy	Dood	When was	the debt incurred?	Opened 11/17		-
	8668 Spring Mountain Las Vegas, NV 89117	Roau					
	Number Street City State Zip C		As of the d	ate you file, the claim	is: Check all that apply		
,	Who incurred the debt? Che	ck one.					
	■ Debtor 1 only		☐ Conting	ent			
	Debtor 2 only		☐ Unliquid	ated			
	Debtor 1 and Debtor 2 only	,	☐ Dispute	d			
	☐ At least one of the debtors	and another		NPRIORITY unsecure	d claim:		
	☐ Check if this claim is for	a community	☐ Student	loans			
	debt Is the claim subject to offset	?		ons arising out of a sepa iority claims	ration agreement or divor	ce that you did not	
	No			•	g plans, and other similar	debts	
	□ Yes		Other. S		Attorney Spring Va		
			- Other. S	peciny	, -pg .u		-

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Debto Debto	Tristan Jeronel Fernandez Manikad Denice Dan Menor Nillo		Case number (if known)				
4.2	Aargon Agency Inc	Last 4 digits of account number	7621	\$714.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117	When was the debt incurred?	Opened 02/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
		☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	· · · · · · · · · · · · · · · · · · ·	Attorney Spring Valley Hospital				
4.3	Aargon Agency Inc Nonpriority Creditor's Name	Last 4 digits of account number	4992	\$602.00			
	Attn: Bankruptcy 8668 Spring Mountain Road	When was the debt incurred?	Opened 10/17				
	Las Vegas, NV 89117 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	At least one of the debtors and another					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	□ Yes	Other. Specify Collection Center Of S	Attorney University Medical				
4.4	Aargon Agency Inc Nonpriority Creditor's Name	Last 4 digits of account number	0570	\$163.00			
	Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117	When was the debt incurred?	Opened 04/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Collection	Attorney Spring Valley Hospital				

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	1 Tristan Jeronel Fernandez Manikad 2 Denice Dan Menor Nillo		Case number (if known)						
4.5	Aargon Agency Inc	Last 4 digits of account number	2505	\$118.00					
	Nonpriority Creditor's Name Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117	When was the debt incurred?	Opened 06/19						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply						
	☐ Debtor 1 only	☐ Contingent							
	■ Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify Collection	Attorney Spring Valley Hospital						
4.6	Aargon Agency Inc Nonpriority Creditor's Name	Last 4 digits of account number	2637	\$323.23					
	Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117	When was the debt incurred?	When was the debt incurred?						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim							
	■ Debtor 1 only □ Contingent								
	☐ Debtor 2 only ☐ Unliquidated								
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing							
	☐ Yes	■ Other. Specify	Collection for Las Vegas Valley Water District						
4.7	Ad Astra Recovery Nonpriority Creditor's Name	Last 4 digits of account number	5291	\$264.00					
	7330 West 33rd Street North Suite 118 Wichita, KS 67205	When was the debt incurred?	Opened 06/16						
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	■ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured							
	☐ Check if this claim is for a community	☐ Student loans							
	debt		ration agreement or divorce that you did not						
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts						
	■ No □ Yes	Other. Specify Collection	• •						
	LI res	Other. Specify	Audities Napiu Casii 33						

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	1 I i i i i i i i i i i i i i i i i i i		Case number (if known)				
4.8	BYL Collections	Last 4 digits of account number	1167	\$72.00			
	Nonpriority Creditor's Name 301 Lacey Street Floor 2	When was the debt incurred?	Opened 02/18				
	West Chester, PA 19382 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
	☐ Debtor 1 only						
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Corporation	Attorney Southwest Gas				
4.9	BYL Collections Nonpriority Creditor's Name	Last 4 digits of account number	5940	\$29.00			
	301 Lacey Street Floor 2	When was the debt incurred?	Opened 04/14				
	West Chester, PA 19382						
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	□Yes	Other. Specify Corporation	Collection Attorney Southwest Gas Corporation				
4.1	Capio Partners LIc	Last 4 digits of account number	9437	\$1,798.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3498	When was the debt incurred?	Opened 11/18				
	Sherman, TX 75091 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts				
	Yes		Attorney Shadow Emergency				

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	or 1 Tristan Jeronel Fernandez Manikad Denice Dan Menor Nillo					
4.1 1	Capio Partners LLC	Last 4 digits of account i	number	7696	\$1,266.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3498	When was the debt incur	rred?	Opened 04/19		
	Sherman, TX 75091 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, th	ne claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY u	nsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out report as priority claims	of a sepa	ration agreement or divorce that you did not		
	■ No	Debts to pension or pro	ofit-sharin	g plans, and other similar debts		
	□Yes	Other. Specify Phys	ection A	Attorney Shadow Emergency P		
4.1 2	Capio Partners Llc Nonpriority Creditor's Name	Last 4 digits of account i	number	0266	\$853.00	
	Attn: Bankruptcy Po Box 3498	When was the debt incur	rred?	Opened 07/19		
	Sherman, TX 75091 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, th	ne claim i	s: Check all that apply		
	■ Debtor 1 only					
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY u	nsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out report as priority claims				
	No	☐ Debts to pension or pro	ofit-sharin	g plans, and other similar debts		
	Yes		ection A	Attorney Shadow Emergency P		
4.1 3	Capio Partners Llc Nonpriority Creditor's Name	Last 4 digits of account i	number	9438	\$79.00	
	Attn: Bankruptcy Po Box 3498	When was the debt incur	rred?	Opened 11/18		
	Sherman, TX 75091 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, th	ne claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY u				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out report as priority claims	of a sepa	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or pro	ofit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Phys	ection A	Attorney Shadow Emergency P		

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Debtor Debtor	1 Tristan Jeronel Fernandez Manikad 2 Denice Dan Menor Nillo		Case number (if known)	
4.1	Capio Partners LLC	Last 4 digits of account number	6914	\$69.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3498	When was the debt incurred?	Opened 04/19	
	Sherman, TX 75091 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Physicians	Attorney Shadow Emergency P	
4.1 5	Capio Partners Llc	Last 4 digits of account number	0019	\$66.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3498	When was the debt incurred?	Opened 11/18	
	Sherman, TX 75091 Number Street City State Zip Code	As of the date you file, the claim i	s: Chack all that apply	
	Who incurred the debt? Check one.	•		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	<u> </u>	report as priority claims Debts to pension or profit-sharin	a plane and other similar debte	
	■ No	·	Attorney Shadow Emergency	
	Yes	Other. Specify Physicians		
4.1 6	Clark County Collection Service Nonpriority Creditor's Name	Last 4 digits of account number	6258	\$862.00
	8860 West Sunset Road Suite 100	When was the debt incurred?	Opened 4/29/19	
	Las Vegas, NV 89148 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement of arrond that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes			

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Denice Dan Menor Nillo		Case number (if known)	
Clark County Collection Service	Last 4 digits of account number	2819	\$483.0
Nonpriority Creditor's Name 8860 W Sunset Las Vegas, NV 89148	When was the debt incurred?	Opened 4/03/14	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify 10 Nvenerg	ЭУ	
Convergent Outsourcing, Inc.	Last 4 digits of account number	6283	\$826.
Nonpriority Creditor's Name	When was the debt incurred?	Opened 02/10	
Attn: Bankruptcy Po Box 9004	when was the debt incurred?	Opened 03/19	
Renton, WA 98057	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	an alama and ather similar dahar	
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify Collection	Attorney Cox Communications	
Convergent Outsourcing, Inc.	Last 4 digits of account number	7097	\$407.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9004	When was the debt incurred?	Opened 01/18	
Renton, WA 98057			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Cneck all that apply	
Debtor 1 only	Contingent		
■ Debtor 2 only	☐ Contingent ☐ Unliquidated		
■ Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes		Attorney Cox Communications	

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	or 1 Tristan Jeronel Fernandez Manikad Denice Dan Menor Nillo					
4.2 0	Credence Resource Management	Last 4 digits of account number	2205	\$2,300.00		
	Nonpriority Creditor's Name 17000 Dallas Parkway Suite 204 Dallas, TX 75248	When was the debt incurred?	Opened 11/17			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Collection	Attorney Att Mobility			
4.2 1	Credence Resource Management	Last 4 digits of account number	8030	\$870.00		
	Nonpriority Creditor's Name 17000 Dallas Parkway Suite 204	When was the debt incurred?	Opened 05/19			
	Dallas, TX 75248 Number Street City State Zip Code Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Collection	Attorney T-Mobile			
4.2	ERC/Enhanced Recovery Corp Nonpriority Creditor's Name	Last 4 digits of account number	0599	\$167.00		
	Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256	When was the debt incurred?	Opened 04/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing				
	Yes	Other. Specify Collection	Attorney At T Mobility			

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FMS Investment Corp	Last 4 digits of account number	7050	*
	Last 4 digits of account number	7250	\$14,289.14
Nonpriority Creditor's Name PO Box 1423	When was the debt incurred?		
Elk Grove Village, IL 60009			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Jefferson Capital Systems, LLC	Last 4 digits of account number	7003	\$4,450.00
Nonpriority Creditor's Name Po Box 1999	When was the debt incurred?	Opened 02/18	•
Saint Cloud, MN 56302 Number Street City State Zip Code	As of the date you file, the claim i	s. Chack all that apply	
Who incurred the debt? Check one.	no or the date you me, the olumn	o. Oncok all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	a plane, and other similar debts	
□ Yes		Company Account Verizon	
Las Vegas Valley Water District	Last 4 digits of account number	0171	\$573.89
Nonpriority Creditor's Name 1001 S. Valley View Boulevard	When was the debt incurred?	2014	
Las Vegas, NV 89153 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	-	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
_	☐ Student loans		
Check if this claim is for a community			
■ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	☐ Obligations arising out of a sepa report as priority claims☐ Debts to pension or profit-sharin	· ,	

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Medical Data Systems (MDS)	Last 4 digits of account number	0159	\$702.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960	When was the debt incurred?	Opened 12/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Center	Attorney Spring Valley Medical	
Medical Data Systems (MDS)	Last 4 digits of account number	0183	\$231.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept 2001 9th Ave Ste 312	When was the debt incurred?	Opened 12/18	
Vero Beach, FL 32960 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Center	Attorney Spring Valley Medical	
Olen Residential Realt	Last 4 digits of account number	8288	\$3,790.00
Nonpriority Creditor's Name 4616 W Sahara Ave Las Vegas, NV 89102	When was the debt incurred?	Opened 6/27/17 Last Active 8/05/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Rental Agre	eement	

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PlusFour, Inc.	Last 4 digits of account number	6238	\$284.00
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 95846 Las Vegas, NV 89193	When was the debt incurred?	Opened 02/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	· · ·	
Yes	Other. Specify Collection	Attorney Community Ambulance	
PlusFour, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	4750	\$271.00
6345 S Pecos Rd Ste 212 Las Vegas, NV 89120	When was the debt incurred?	Opened 11/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection A Solutions	Attorney Desert Radiology	
PlusFour, Inc.	Last 4 digits of account number	6418	\$270.00
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 95846	When was the debt incurred?	Opened 06/14	
Las Vegas, NV 89193			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d claim:	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	u Giaiiii.	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	A 11 41	Attorney Southwest Medical	

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Receivables Performance Mgmt	Last 4 digits of account number	3825	\$1,144.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1548	When was the debt incurred?	Opened 01/19	
Lynnwood, WA 98036	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection	Attorney Sprint	
Shadow Emergency Physicians	Last 4 digits of account number	7942	\$669.00
Nonpriority Creditor's Name PO Box 13917 Philadelphia, PA 19101	When was the debt incurred?	07/27/14	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans	- O.d	
debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Medical		
Spring Valley Hospital	Look 4 digite of cooping number	7942	\$490.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ-30.00
PO Box 31001-0827 Pasadena, CA 91110	When was the debt incurred?	01/2015	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Medical		

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Tidewater Finance Co	Last 4 digits of account number	8159	\$13,697.00		
Nonpriority Creditor's Name Attn: Bankruptcy 6520 Indian River Rd Virginia Beach, VA 23464	When was the debt incurred?	Opened 09/11 Last Active 2/17/14			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
□ Yes	Other. Specify Automobile	<u> </u>			
Toyota Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$7,359.00		
Attn: Bankruptcy Dept Po Box 8026	When was the debt incurred?	Opened 05/15 Last Active 4/07/18			
Cedar Rapids, IA 52409 Number Street City State Zip Code	As of the date you file, the claim i	s. Chack all that apply			
Who incurred the debt? Check one.	The of the date you me, the stand lot officer an that apply				
Debtor 1 only	Пол				
Debtor 2 only	☐ Contingent				
Debtor 1 and Debtor 2 only	☐ Unliquidated				
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	1 claim:			
_	Student loans	a oldiiii.			
■ Check if this claim is for a community debt steep the claim subject to offset?	_	ration agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify Automobile)			
		WEGG			
Toyota Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	<u>Y598</u>	\$6,373.00		
Atty: Bankruptcy Dept Po Box 8026 Cedar Rapids, IA 52409	When was the debt incurred?	Opened 09/14 Last Active 3/14/16			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
Debtor 1 only	Пол				
Debtor 2 only	☐ Contingent				
■ Debtor 1 and Debtor 2 only	☐ Unliquidated				
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
<u>_</u>	Student loans				
Check if this claim is for a community debt	_	ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	and the state of t			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
☐ Yes	Other. Specify Lease				

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		eronel Fernandez Manik an Menor Nillo	ad	Case r	number (_{if kno}	wn)	
4.3 8 Tra	answorld	Systems Inc.	Last 4 digits of account numbe	er 4PS	SS		\$669.00
50	npriority Cred 7 Pruden orsham, P	tial Road	When was the debt incurred?				
Nur	mber Street (City State Zip Code the debt? Check one.	As of the date you file, the claim	m is: Che	ck all that apply	у	
	Debtor 1 onl	ly	☐ Contingent				
	Debtor 2 onl	ly	<u> </u>				
	Debtor 1 and	d Debtor 2 only	☐ Unliquidated				
_		of the debtors and another	☐ Disputed Type of NONPRIORITY unsecu	red claim	1:		
_		s claim is for a community	☐ Student loans	iou oiuiii	•		
deb Is t		bject to offset?	☐ Obligations arising out of a se report as priority claims	eparation a	agreement or d	livorce that you did not	
	No		Debts to pension or profit-sha	aring plans	s, and other sin	nilar debts	
	Yes			n for Sh	nadow Eme		
Part 3:	List Others	s to Be Notified About a De	ebt That You Already Listed				
is trying to have more	o collect fro e than one c	m you for a debt you owe to s	. •	r in Parts dditional d	1 or 2, then lis creditors here	st the collection agency here. S b. If you do not have additional	Similarly, if you
Name and A		no	On which entry in Part 1 or Part 2 did y				
MRS Associates, Inc. 1930 Olney Ave		nc.	Line <u>4.36</u> of (<i>Check one</i>):			h Priority Unsecured Claims	
Cherry Hi	-	003		■ Part 2	2: Creditors with	h Nonpriority Unsecured Claims	
			Last 4 digits of account number	8	8253		
Name and A			On which entry in Part 1 or Part 2 did y				
The Lang		Firm PC enue Suite 103	Line 4.35 of (<i>Check one</i>):			h Priority Unsecured Claims	
Attn: Cale				Part 2	2: Creditors with	h Nonpriority Unsecured Claims	
Las Vega	ıs, NV 891	104	Last Adiates of account according				
			Last 4 digits of account number		9078		
Part 4:	Add the Ar	mounts for Each Type of U	nsecured Claim				
6. Total the a		certain types of unsecured cla	nims. This information is for statistica	ıl reportin	ng purposes o	only. 28 U.S.C. §159. Add the ar	nounts for each
						Total Claim	
	6a.	Domestic support obligation	s	6a.	\$	0.00	
Total claims							
from Part 1	6b.	Taxes and certain other deb		6b.	\$	0.00	
	6c.	•	I injury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority ur	secured claims. Write that amount here.	. 6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$	0.00	
						Total Claim	
	6f.	Student loans		6f.	\$	0.00	
Total claims							
from Part 2	6g.		separation agreement or divorce that		\$	0.00	
	6h.	you did not report as priority Debts to pension or profit-sl	v claims naring plans, and other similar debts	6g. 6h.	\$	0.00	
	6i.	Other. Add all other nonpriorit	y unsecured claims. Write that amount	6i.	\$	77,497.26	
		here.					
	6j.	Total Nonpriority. Add lines 6	of through 6i.	6j.	\$	77,497.26	

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Fill in this infor	mation to identify your	case:				
Debtor 1	Tristan Jeronel F					
	First Name	Middle Name	Last Name			
Debtor 2	Denice Dan Menor Nillo					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA				
Case number _					☐ Check if this is an amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for		
2.1							
	Name						
	Number	Street					
	City		State	ZIP Code	_		
2.2					<u></u>		
	Name						
	Number	Street			<u> </u>		
	City		State	ZIP Code			
2.3	Oity		Olate	Zii Oode			
	Name						
	Number	Street			<u> </u>		
	City		State	ZIP Code			
2.4							
	Name						
	Number	Street			<u> </u>		
	City		State	ZIP Code	<u> </u>		
2.5	- ity		Oldio	211 0000			
	Name				_		
	Number	Street					
	City		State	ZIP Code	<u> </u>		

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Fill in this	information to identify	your case:		
Debtor 1	Tristan Jeroi	nel Fernandez Manikad	1	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	Denice Dan I	Menor Nillo Middle Name	Last Name	
	3,			
United Sta	tes Bankruptcy Court for	the: DISTRICT OF NE	/ADA	
Case num	ber			
(if known)				☐ Check if this is an amended filing
				amended ming
Officia	I Form 106H			
Sched	lule H: Your C	odebtors		12/15
your name	and case number (if kn	own). Answer every que		e. On the top of any Additional Pages, write otor.
_		· ,	•	
■ No				
☐ Yes	3			
			ity property state or territory? (Commo, Puerto Rico, Texas, Washington, and	unity property states and territories include Wisconsin.)
■ No	Go to line 3.			
		r spouse, or legal equivale	nt live with you at the time?	
			•	
in line Form	2 again as a codebtor	only if that person is a gu	iarantor or cosigner. Make sure you h	ouse is filing with you. List the person shown have listed the creditor on Schedule D (Official Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebto			nn 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State	and ZIP Code	Chec	call schedules that apply:
3.1			□ Sc	hedule D, line
	Name			hedule E/F, line
			□ Sc	hedule G, line
	Number Street	04-4-	7/0.04	
	City	State	ZIP Code	
			П.	hada B. Far
3.2	Name			hedule D, line hedule E/F, line
				hedule G, line
-	Number Street			· —
	City	State	ZIP Code	

Fill in this information	to identify your case:	
Debtor 1	Tristan Jeronel Fernandez Manikad	
Debtor 2 (Spouse, if filing)	Denice Dan Menor Nillo	
United States Bankru	uptcy Court for the: DISTRICT OF NEVADA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Forn	n 106I	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment				
1.	Fill in your employment information.		Debto	r1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Em	ployed	■ Employed
	attach a separate page with information about additional	Employment status	□ No	t employed	☐ Not employed
	employers.	Occupation	Serve	er	Barista
	Include part-time, seasonal, or self-employed work.	Employer's name	D Gri	II	Coffee Bean
	Occupation may include student or homemaker, if it applies.	Employer's address	••••	remont Street /egas, NV 89101	5757 Wayne Newton Blvd. Las Vegas, NV 89119
		How long employed the	nere?	08/2018-present	09/2019-present

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,338.40 1,222.30 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 1,222.30 2,338.40

Official Form 106l Schedule I: Your Income page 1

Debtor 1 Debtor 2	Tristan Jeronel Fernandez Manikad Denice Dan Menor Nillo		(Case	number (<i>if k</i>	nowr	n) _				
				For	Debtor 1				ebtor 2 o		
Co	ppy line 4 here	4.		\$	1,22	2.30	0	\$	2,33	8.40	
5. Li s	st all payroll deductions:										
5a	Tax, Medicare, and Social Security deductions	5a.		\$	14	6.43	3	\$	33	6.26	
5b	•	5b.		\$		0.00	_	\$		0.00	
5c	·	5c.		\$		0.0	_	\$		0.00	
5d	·	5d.		\$		0.0	_	\$		0.00	
5e	. Insurance	5e.		\$_	(0.0	0	\$		0.00	
5f.	Domestic support obligations	5f.		\$		0.0	0	\$		0.00	
5g	. Union dues	5g.		\$		0.0	0	\$		0.00	
5h	. Other deductions. Specify: Tips	_ 5h.	.+	\$	48	3.97	7 +	\$		0.00	
6. Ac	ld the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	63	0.40	0_	\$	33	6.26	
7. C a	lculate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	59	1.90	0_	\$	2,00	2.14	
8. Lis 8a	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		Φ.		0.04	_	Ф.		0.00	
Oh	monthly net income. Interest and dividends	8a. 8b.		\$_ \$		0.00	_	\$		0.00	
8b 8c		8c.		\$_ \$		0.00	_	Ф \$		0.00	
8d		8d.		<u>\$</u> —		0.00		\$		0.00	
8e		8e.		\$		0.0	_	\$		0.00	
8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.0	_	\$		0.00	
8g		8g.		\$_		0.0		\$		0.00	
8h	Other monthly income. Specify:	_ 8h.	.+	\$		0.0) +	\$		0.00	
9. Ac	Id all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Ş	.	-	0.0	0	\$		0.00	
10. C a	Ilculate monthly income. Add line 7 + line 9.	10.	\$		591.90	1.	\$	2.00	2.14 =	\$	2,594.04
	ld the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					1 [<u> </u>	,_,			_,
Inc oth Do	ate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your ner friends or relatives. In not include any amounts already included in lines 2-10 or amounts that are not a secify:	depe			•				hedule J. 11. +		0.00
Wı	Id the amount in the last column of line 10 to the amount in line 11. The restricte that amount on the Summary of Schedules and Statistical Summary of Certain plies								_	ombin	
13. D c	you expect an increase or decrease within the year after you file this form? No.	?							m	onthly	/ income
	Yes. Explain:										

Official Form 106l Schedule I: Your Income page 2

HIII	in this informa	ation to identify yo	our caca:			1		
Deb	tor 1	Tristan Jero	nel Ferna	ındez Manikad		Che	ck if this is: An amended filing	
	otor 2 ouse, if filing)	Denice Dan	Menor Ni	llo			•	ving postpetition chapter the following date:
Unit	ed States Bankr	ruptcy Court for the	: DISTRI	CT OF NEVADA			MM / DD / YYYY	
	e number							
(If kr	nown)							
Of	fficial Fo	rm 106J						
		J: Your	Exper	ises				12/1
Be a	as complete ormation. If m	and accurate as	s possible. eded, atta	If two married people ar ch another sheet to this				
Par	t 1: Descr	ribe Your House	ehold					
1.	Is this a joir ☐ No. Go to							
	_	es Debtor 2 live i	in a separ	ate household?				
	■ N	lo		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
۷.	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No □ Yes
								□ No
								Yes
								□ No □ Yes
3.	Do your exp	penses include		No				⊔ Yes
		f people other to d your depende	han 🗖	Yes				
Par		ate Your Ongoi		v Evnansas				
Est	imate your ex	kpenses as of yo	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it luded it on Schedule I: Y			Your exp	enses
(,						
4.		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgage	e 4. \$	\$	800.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a. \$	\$	0.00
	•	rty, homeowner's				4b. \$	·	0.00
		· maintenance, re ·owner's associat		ıpkeep expenses dominium dues		4c. \$ 4d. \$	·	0.00
5.				our residence, such as ho	me equity loans	5.	·	0.00

6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 6d. Specify: 7. Food and housekeeping supplies 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	- - - - - - - - - - -
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 6d. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$ 75.00 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare.	- - - - - - - - - - -
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. \$ 7. Food and housekeeping supplies 7. \$ 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare.	- - - - - - - -
6d. Other. Specify: 7. Food and housekeeping supplies 7. Substituting the food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare.	-
7. Food and housekeeping supplies 7. \$ 450.00 8. Childcare and children's education costs 8. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 75.00 10. Personal care products and services 10. \$ 50.00 11. Medical and dental expenses 11. \$ 0.00 12. Transportation. Include gas, maintenance, bus or train fare.	- - - - - -
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare.	
9. Clothing, laundry, and dry cleaning 9. \$ 75.00 10. Personal care products and services 10. \$ 50.00 11. Medical and dental expenses 11. \$ 0.00 12. Transportation. Include gas, maintenance, bus or train fare.	- - -
 10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 	
 Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. 	_
12. Transportation. Include gas, maintenance, bus or train fare.	_
Do not include car payments.	
	_
13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00	_
14. Charitable contributions and religious donations 14. \$ 0.00	_
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 	
15a. Life insurance 15a. \$ 0.00	
15b. Health insurance 15b. \$ 0,00	_
15c. Vehicle insurance 15c. \$ 186.00	_
15d. Other insurance. Specify: 15d. \$ 0,00	_
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	_
Specify: 16. \$ 0.00	
17. Installment or lease payments:	=
17a. Car payments for Vehicle 1 17a. \$ 512.00	_
17b. Car payments for Vehicle 2 17b. \$	_
17c. Other. Specify: 17c. \$ 0.00	_
17d. Other. Specify: 17d. \$ 0.00	_
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5. Schedule I. Your Income (Official Form 106)) 18. \$ 0.00	
deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). 18. \$	_
Specify: 19.	-
20. Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i> .	
20a. Mortgages on other property 20a. \$ 0.00	
20b. Real estate taxes 20b. \$ 0,00	_
20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00	_
20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00	_
20e. Homeowner's association or condominium dues 20e. \$ 0.00	_
21. Other: Specify: 21. +\$ 0.00	_
22. Coloulate your monthly symanos]
22. Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 2,558.00	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$	
22c. Add line 22a and 22b. The result is your monthly expenses.	
23. Calculate your monthly net income.	_
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,594.04	
23b. Copy your monthly expenses from line 22c above. 23b\$	_
CO - O black and a second black	
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income 23c. \$ 36.04	,
The result is your <i>monthly net income</i> .	
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because modification to the terms of your mortgage? No.	of a
■ No. ☐ Yes Explain here:	

Fill in th	nis informa	ation to identify your	case:					
Debtor 1	1	Tristan Jeronel Fe	ernandez Manikad					
		First Name	Middle Name	Las	t Name			
Debtor 2	2	Denice Dan Meno	r Nillo					
(Spouse if,	, filing)	First Name	Middle Name	Las	t Name			
United S	States Bank	cruptcy Court for the:	DISTRICT OF NEVA	DA				
Case nu	ımber							
(if known)								Check if this is an
								amended filing
						Schedules ng correct information.		12/15
obtainin	g money o r both. 18 l	or property by fraud ir U.S.C. §§ 152, 1341, 1	n connection with a ba			edules. Making a false sta esult in fines up to \$250,		
	Sign I	Below						
Dic	d you pay o	or agree to pay some	one who is NOT an att	torney to help	you fil	I out bankruptcy forms?		
	No							
	Yes. Na	me of person						etition Preparer's Notice,
						Declaration	on, and Sigr	nature (Official Form 119)
		of perjury, I declare rue and correct.	that I have read the su	ummary and s	chedul	es filed with this declarat	tion and	
Х	/s/ Trista	ın Jeronel Fernand	ez Manikad	X	/s/ De	enice Dan Menor Nillo		
		Jeronel Fernandez				ce Dan Menor Nillo		
	Signature	of Debtor 1			Signat	ture of Debtor 2		
	Date Oc	ctober 29, 2019			Date	October 29, 2019		

Eill i	n this infor	nation to identify you	r casa:			
Debt			Fernandez Manikad			
Debi	.01 1	First Name	Middle Name	Last Name		
Debt	tor 2	Denice Dan Men	or Nillo			
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	DISTRICT OF NEVADA			
Case (if kno	e number _					theck if this is an mended filing
Sta Be as	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
Part	1: Give I	Details About Your Ma	nrital Status and Where You	Lived Before		
1. '	What is you	r current marital statu	ıs?			
	■ Married □ Not ma					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part	2 Explai	in the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,252.62	■ Wages, commissions, bonuses, tips	\$22,781.59
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	nice Dan Menor Nill	0	Case	Case number (if known)			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
For last calend (January 1 to	dar year: December 31, 2018)	■ Wages, commissions, bonuses, tips	\$6,247.00	■ Wages, commissions, bonuses, tips	\$20,704.00		
		☐ Operating a business		☐ Operating a business			
	dar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$514.00	■ Wages, commissions, bonuses, tips	\$22,093.00		
		☐ Operating a business		☐ Operating a business			
List each s		se and you have income that yome from each source separa	G .	•			
		Debtor 1		Debtor 2			
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
For the calend	dar voar boforo that:	Business	\$4,837.00				
(January 1 to	December 31, 2017)						
Part 3: List 6. Are either No.	December 31, 2017) Certain Payments You Debtor 1's or Debtor 2 Neither Debtor 1 nor individual primarily for a During the 90 days bef No. Go to line Yes List below paid that c not include * Subject to adjustmer Debtor 1 or Debtor 2	u Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily consume a personal, family, or househo ore you filed for bankruptcy, di 7. each creditor to whom you paireditor. Do not include payment a payments to an attorney for the ton 4/01/22 and every 3 year or both have primarily consumers.	Bankruptcy r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,825* or more in the for domestic support oblig nis bankruptcy case. s after that for cases filed on Imer debts.	of \$6,825* or more? n one or more payments and ations, such as child support or after the date of adjustmer	the total amount you and alimony. Also, do		
Part 3: List 6. Are either No.	December 31, 2017) Certain Payments You Debtor 1's or Debtor 2 Neither Debtor 1 nor individual primarily for 3 During the 90 days bef No. Go to line on the include of	u Made Before You Filed for 2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househout ore you filed for bankruptcy, dia 7. each creditor to whom you pair reditor. Do not include payment a payments to an attorney for the ton 4/01/22 and every 3 year or both have primarily consumer you filed for bankruptcy, dia 1.	Bankruptcy r debts? Imer debts. Consumer debts Id purpose." d you pay any creditor a total d a total of \$6,825* or more in tts for domestic support oblig his bankruptcy case. s after that for cases filed on Imer debts. d you pay any creditor a total d a total of \$600 or more and	I of \$6,825* or more? In one or more payments and ations, such as child support or after the date of adjustment of \$600 or more?	the total amount you and alimony. Also, do at.		

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Debto		кас	Cas	e number (if known)			
<i>In</i> of a	fithin 1 year before you filed for bankruptous iders include your relatives; any general pay which you are an officer, director, person in business you operate as a sole proprietor. 1 imony.	ortners; relatives of any ger control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	ou are a general ny managing ag	partner; corporations jent, including one for	
	- 110						
li	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment	
in	fithin 1 year before you filed for bankruptousider? clude payments on debts guaranteed or cos		, ments or transfer a	ny property on a	ccount of a de	bt that benefited an	
	No Yes. List all payments to an insider						
lı	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t		
Part 4	Identify Legal Actions, Repossession	es and Foreclosures	para	C C C			
	st all such matters, including personal injury odifications, and contract disputes. No Yes. Fill in the details.	cases, small claims action	s, divorces, collectio	n suits, paternity a	ctions, support	or custody	
	Case title Case number	Nature of the case			Status of the case		
] J]	Fidewater Finance Company vs. Jose Rionile Herbert Manikad, Feresita Fernandez Manikad, Fristan Jeronel Manikad 4C019078	Lawsuit	Justice Court, Township County Courth 200 Lewis Avel Las Vegas, NV	ouse nue	■ Pending □ On appea □ Conclude		
C	fithin 1 year before you filed for bankrupte heck all that apply and fill in the details below No. Go to line 11.		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?	
_	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the	
	Tourist Hamo and Addition	Explain what happene	d	Dato		property	
	-	otcy, did any creditor, inc		nancial institution	n, set off any ar	mounts from your	
C	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount	
	fithin 1 year before you filed for bankrupto ourt-appointed receiver, a custodian, or a No Yes		erty in the possessi			it of creditors, a	

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	otor 1 Tristan Jeronel Fernandez Manikad Denice Dan Menor Nillo	Case number	er (if known)	
Par	t 5: List Certain Gifts and Contributions			
13.	■ No	, did you give any gifts with a total value of more	e than \$600 per person	?
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	, did you give any gifts or contributions with a to	otal value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contribu	ution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
	or gambling? ■ No □ Yes. Fill in the details. Describe the property you lost and □	ribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred Includ	de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loco	lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepare include any attorneys, bankruptcy petition prepare	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services requi		rty to anyone you
	No Silling the details			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Office of Rodney K. Okano 6069 S. Fort Apache Road, Ste. 100 Las Vegas, NV 89148	Legal Fees	10/07/19	\$1,100.00
	Allen Credit and Debt Counseling Agency	Credit Counseling	09/12/19	\$25.00
17.	promised to help you deal with your creditors Do not include any payment or transfer that you list No		y or transfer any prope	rty to anyone who
	Yes. Fill in the details.	Description and value of any manager	Data november	A
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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	tor 1 tor 2	Tristan Jeronel Fernandez Manil Denice Dan Menor Nillo	kad		Case nun	nber (if known)	
,	transf Include include ■ N	n 2 years before you filed for bankrup terred in the ordinary course of your k e both outright transfers and transfers m e gifts and transfers that you have alread to	ousiness or financial af nade as security (such as	fairs? the granting of a	•		
	Perso Addro	on Who Received Transfer	Description and property transfe		paym	ribe any property or ents received or debts n exchange	Date transfer was made
	Within benefi ■ N	n 10 years before you filed for bankru iciary? (These are often called asset-pr lo 'es. Fill in the details.		ny property to a	self-settle	ed trust or similar device	of which you are a
	Name	e of trust	Description and	value of the prop	perty trans	sferred	Date Transfer was made
Part	0.	List of Certain Financial Accounts, In	estamanta Cafa Damas	it Davis and Ct		-	
	sold, i Includ house N	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso do 'es. Fill in the details.	or other financial accor	unts; certificates	of depos		, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		account number	instrument	closed, sold, moved, or transferred		before closing or transfer
,		3ank 3ox 1800 t Paul, MN 55101	XXXX-2943	■ Checking □ Savings □ Money Mar □ Brokerage □ Other	ket	09/13/19	\$0.00
	•	u now have, or did you have within 1 or other valuables?	year before you filed fo	or bankruptcy, ar	ny safe de	posit box or other depos	itory for securities,
		lo ′es. Fill in the details.					
		e of Financial Institution ess (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	_	you stored property in a storage unit	or place other than you	ır home within 1	year befo	re you filed for bankrupt	cy?
	_	lo ′es. Fill in the details.					
	Name	e of Storage Facility ess (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?

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	otor 1 otor 2			Ca	ase number (if known)		
Pai	t 9:	Identify Property You Hold or Control for	Someone Else				
23.		you hold or control any property that some comeone.	one else owns? Include any proper	rty y	ou borrowed from, are storing fo	r, or hold in trust	
		No Yes. Fill in the details.					
		rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value	
Pai	t 10:	Give Details About Environmental Inform	ation				
For	the p	ourpose of Part 10, the following definitions	apply:				
•	toxi regi	ironmental law means any federal, state, or c substances, wastes, or material into the a lations controlling the cleanup of these su means any location, facility, or property as	iir, land, soil, surface water, ground bstances, wastes, or material.	dwa	tter, or other medium, including s	tatutes or	
	to o	wn, operate, or utilize it, including disposal	sites.		•		
		<i>ardous material</i> means anything an environ ardous material, pollutant, contaminant, or		s Wa	aste, nazardous substance, toxic	substance,	
Rep	ort a	II notices, releases, and proceedings that y	ou know about, regardless of when	n th	ey occurred.		
24.	Has	any governmental unit notified you that yo	u may be liable or potentially liable	un	der or in violation of an environm	ental law?	
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice	
25.	Hav	e you notified any governmental unit of any	release of hazardous material?				
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or admini	strative proceeding under any env	iron	mental law? Include settlements	and orders.	
		No Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case	
Pai	t 11:	Give Details About Your Business or Cor	nnections to Any Business				
27.	With	nin 4 years before you filed for bankruptcy,	did you own a business or have ar	ıy o	f the following connections to an	y business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
		☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)		
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
		☐ An owner of at least 5% of the voting or equity securities of a corporation					

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Debtor 1 Tristan Jeronel Fernandez Mani Debtor 2 Denice Dan Menor Nillo		se number (if known)
■ No. None of the above applies. Go to □ Yes. Check all that apply above and fi	Part 12.	
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
 28. Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below. 	otcy, did you give a financial statement to a	nyone about your business? Include all financial
Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part 12: Sign Below		
	a false statement, concealing property, or o	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/ Tristan Jeronel Fernandez Manikad	/s/ Denice Dan Menor Nillo	
Tristan Jeronel Fernandez Manikad Signature of Debtor 1	Denice Dan Menor Nillo Signature of Debtor 2	
Date October 29, 2019	Date October 29, 2019	
Did you attach additional pages to <i>Your Statem</i> ■ No □ Yes	nent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is no ■ No □ Yes. Name of Person Attach the Bankr		

Debtor 1	Tristan Jerone	l Fernandez Manikad		
	First Name	Middle Name	Last Name	
Debtor 2	Denice Dan Me	enor Nillo		
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number				
0				
(if known)				☐ Check if this is an
				amended filing
,				_

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Securing debt.		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Tristan Jeronel Fernandez Manikad Debtor 2 Denice Dan Menor Nillo	Case number (if known)	
name:		
name:	☐ Retain the property and redeem it. ☐ Retain the property and enter into a	☐ Yes
Description of property	Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	
-		
Part 2: List Your Unexpired Personal Property Leases		
For any unexpired personal property lease that you listed in in the information below. Do not list real estate leases. Une You may assume an unexpired personal property lease if the	xpired leases are leases that are still in effect; the	lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		□ v
Troporty.		☐ Yes
Lessor's name:		□ No
Description of leased Property:		
Troporty.		☐ Yes
Lessor's name:		□ No
Description of leased		
Property:		☐ Yes
Lessor's name:		□ No
Description of leased		_
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		– v
Troporty.		☐ Yes
Lessor's name:		□ No
Description of leased Property:		□ Yes
Lessor's name:		□ Na
Description of leased		□ No
Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated my iproperty that is subject to an unexpired lease.	intention about any property of my estate that sec	ures a debt and any personal
X /s/ Tristan Jeronel Fernandez Manikad	X /s/ Denice Dan Menor Nillo	
Tristan Jeronel Fernandez Manikad	Denice Dan Menor Nillo	
Signature of Debtor 1	Signature of Debtor 2	
Date October 29, 2019	Date October 29, 2019	

Official Form 108

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

In	Tristan Jeronel Fernandez Manikad re Denice Dan Menor Nillo		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN			, ,	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered of	or to
				1,100.00	
	Prior to the filing of this statement I have received		\$	1,100.00	
	Balance Due		\$	0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	pers and associates of my law	firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				A
6.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspect	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. Representation of the debtor in adversary proceeding e. [Other provisions as needed] 	ement of affairs and plan which ors and confirmation hearing, an	may be required; any adjourned hea		
7.	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s)	in
	October 29, 2019	/s/ Rodney K. Oka	ano		
-	Date	Rodney K. Okano Signature of Attorne LAW OFFICE OF 6069 S. Fort Apac Suite 100	y RODNEY K. OKAI che Road	NO	
		Las Vegas, NV 89 (702) 566-3600 F)	
		okanofirm@attor	• •	, 	
1		Name of law firm			

United States Bankruptcy Court District of Nevada

In re	Tristan Jeronel Fernandez Ma Denice Dan Menor Nillo	nikad	Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR M	ATRIX	
Γhe ab	ove-named Debtors hereby verify	that the attached list of creditors is true and corre	ect to the best	of their knowledge.
Date:	October 29, 2019	/s/ Tristan Jeronel Fernandez Ma		
		Tristan Jeronel Fernandez Manik	ad	
		Signature of Debtor		
Date:	October 29, 2019	/s/ Denice Dan Menor Nillo		

Denice Dan Menor Nillo Signature of Debtor Tristan Jeronel Fernandez Manikad Denice Dan Menor Nillo 7813 Cape Flattery Las Vegas, NV 89147

Rodney K. Okano LAW OFFICE OF RODNEY K. OKANO 6069 S. Fort Apache Road Suite 100 Las Vegas, NV 89148

Aargon Agency Inc Acct No xxxxxx0527 Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117

Aargon Agency Inc Acct No xxxxxx7621 Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117

Aargon Agency Inc Acct No xxxxxx4992 Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117

Aargon Agency Inc Acct No xxxxxx0570 Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117

Aargon Agency Inc Acct No xxxxxx2505 Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117

Aargon Agency Inc Acct No xxxx-xx2637 Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117

Ad Astra Recovery Acct No xxx5291 7330 West 33rd Street North Suite 118 Wichita, KS 67205 BYL Collections Acct No xxxx1167 301 Lacey Street Floor 2 West Chester, PA 19382

BYL Collections Acct No xxx5940 301 Lacey Street Floor 2 West Chester, PA 19382

Capio Partners Llc Acct No xxxx9437 Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Capio Partners LLC Acct No xxxx7696 Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Capio Partners Llc Acct No xxxx0266 Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Capio Partners Llc Acct No xxxx9438 Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Capio Partners LLC Acct No xxxx6914 Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Capio Partners Llc Acct No xxxx0019 Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Clark County Collection Service Acct No xxx6258 8860 West Sunset Road Suite 100 Las Vegas, NV 89148 Clark County Collection Service Acct No xxx2819 8860 W Sunset Las Vegas, NV 89148

Clark County Treasurer c/o Bankruptcy Clerk 500 S. Grand Central Pkwy, 1st Floor PO Box 551220 Las Vegas, NV 89155-1220

Convergent Outsourcing, Inc. Acct No xxxx6283 Attn: Bankruptcy Po Box 9004 Renton, WA 98057

Convergent Outsourcing, Inc. Acct No xxxx7097 Attn: Bankruptcy Po Box 9004 Renton, WA 98057

Credence Resource Management Acct No xxxxx2205 17000 Dallas Parkway Suite 204 Dallas, TX 75248

Credence Resource Management Acct No xxxxx8030 17000 Dallas Parkway Suite 204 Dallas, TX 75248

Department of Employment, Training and Rehab
Employment Security Division
500 E. Third Street
Carson City, NV 89713

ERC/Enhanced Recovery Corp Acct No xxxxx0599 Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

FMS Investment Corp Acct No xxxxxx7250 PO Box 1423 Elk Grove Village, IL 60009

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Jefferson Capital Systems, LLC Acct No xxxxxxxxx7003 Po Box 1999 Saint Cloud, MN 56302

Las Vegas Valley Water District Acct No xxxxxxx017-1 1001 S. Valley View Boulevard Las Vegas, NV 89153

Medical Data Systems (MDS) Acct No xxxxx0159 Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960

Medical Data Systems (MDS) Acct No xxxxx0183 Attn: Bankruptcy Dept 2001 9th Ave Ste 312 Vero Beach, FL 32960

MRS Associates, Inc. Acct No LU1.8048253 1930 Olney Ave Cherry Hill, NJ 08003

Nevada Department of Taxation Bankruptcy Section 555 E. Washington Avenue, Ste 1300 Las Vegas, NV 89101

Olen Residential Realt Acct No x8288 4616 W Sahara Ave Las Vegas, NV 89102

PlusFour, Inc. Acct No xxx6238 Attn: Bankruptcy Department Po Box 95846 Las Vegas, NV 89193

PlusFour, Inc. Acct No xxx4750 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120

PlusFour, Inc. Acct No xxx6418 Attn: Bankruptcy Department Po Box 95846 Las Vegas, NV 89193 Receivables Performance Mgmt Acct No xxxx3825 Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98036

Shadow Emergency Physicians Acct No xxxxxxxx7942 PO Box 13917 Philadelphia, PA 19101

Spring Valley Hospital Acct No xxxxxxxx7942 PO Box 31001-0827 Pasadena, CA 91110

State of Nevada Dept. of Motor Vehicles Attn: Legal Division 555 Wright Way Carson City, NV 89711

The Langdale Law Firm PC Acct No 14C019078 1800 E. Sahara Avenue Suite 103 Attn: Caleb J. Langsdale Las Vegas, NV 89104

Tidewater Finance Co Acct No xxxxx8159 Attn: Bankruptcy 6520 Indian River Rd Virginia Beach, VA 23464

Toyota Financial Services Acct No xxxxxxxxxxxx0001 Attn: Bankruptcy Dept Po Box 8026 Cedar Rapids, IA 52409

Toyota Financial Services Acct No xxxxxxY598 Atty: Bankruptcy Dept Po Box 8026 Cedar Rapids, IA 52409

Transworld Systems Inc. Acct No xx4PSS 507 Prudential Road Horsham, PA 19044

United States Attorney's Office Attn: Civil Process Clerk 333 Las Vegas Blvd, South Suite # 5000 Las Vegas, NV 89101 United States Trustee 300 Las Vegas Blvd., South #4300 Las Vegas, NV 89101